

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 093000001170

1. Entity Name

Bouganvillas LTD
Apartment's

Principal Place of Business

Mailing Address

FILED

01 APR 11 PM 4:15

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

2. Principal Place of Business

100 South Military Trail

3. Mailing Address

100 South Military Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#19

#19

City & State

Deerfield Beach, FL

City & State

Deerfield Beach, FL

Zip

Country

33442

USA

Zip

Country

33442

USA

4. FEI Number

65-0454618

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Kenneth Subandran
100 South Military Trail
#19
Deerfield Beach, FL 33441

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/03/01
DATE

9. Capital Contributions

as Shown on record.

300,000.00

10. Amount of Capital Contributions

in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # P93000077681
NAME Barchin, Inc.
STREET ADDRESS 100 South Military Trail #19
CITY-ST-ZIP Deerfield Beach, FL 33442

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

100004014731-5
-04/18/01-01013-007
***526.25 ***526.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/03/01 953 2224

CR2E003 (11/00)